


REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application No.	09/904,713
	Filing Date	July 12, 2001
	First Named Inventor	Michael T. Yacifila
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	2386P002

I hereby revoke all previous powers of attorney given in the above-identified application:			
<input type="checkbox"/> A Power of Attorney is submitted herewith OR <input checked="" type="checkbox"/> I hereby appoint the practitioners associated with Customer Number: 08791			
<input checked="" type="checkbox"/> Please change the correspondence address for the above-identified application to: <input checked="" type="checkbox"/> The address associated with Customer Number: 08791 OR			
<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City		State	Zip Code
Country	Telephone	Fax	
I am the: <input type="checkbox"/> Applicant <input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under of 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
SIGNATURE of Applicant or Assignee of Record			
Name	Gilbert Gluck		
Signature			
Date	2/10/09		
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representatives are required. Submit multiple forms if more than one signature is required; see below.</small>			
<input type="checkbox"/> *Total of _____ forms are submitted			